

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Midwest Values PAC

ADDRESS (number and street)

P.O. Box 583232

☐Check if different
than previously
reported. (ACC)

Minneapolis

MN

55458

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00416131

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Thomas Borman

Signature of Treasurer

Electronically Filed by Thomas Borman

Date

01

30

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Midwest Values PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		82400.67
(b) Cash on Hand at Beginning of Reporting Period	29627.86	
(c) Total Receipts (from Line 19)	5582.76	37874.09
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	35210.62	120274.76
7. Total Disbursements (from Line 31)	22159.00	107223.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13051.62	13051.62
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Midwest Values PAC

Report Covering the Period:

From:

M M D D Y Y W Y
0 7 0 1 2 0 0 7

To:

M M D D Y Y W Y
1 2 3 1 2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5100.00	11550.00
(i) Itemized (use Schedule A)	304.00	5145.20
(ii) Unitemized	5404.00	16695.20
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5404.00	16695.20
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	57.20	12012.22
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	121.56	1192.67
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	2974.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	2974.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5582.76	37874.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5582.76	34900.09

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	4031.37
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	2974.00
(b) Other Federal Operating Expenditures.....	8959.00	56982.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	8959.00	63988.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	30000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	35.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	35.00
29. Other Disbursements.....	8200.00	13200.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	22159.00	107223.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22159.00	104249.14

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	5404.00	16695.20
34. Total Contribution Refunds (from Line 28(d))	0.00	35.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5404.00	16660.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8959.00	61014.14
37. Offsets to Operating Expenditures (from Line 15, page 3)	57.20	12012.22
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8901.80	49001.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Tom J. Hanks

Mailing Address 8383 Wilshire Blvd., Ste. 500

City

Beverly Hills

State

CA

Zip Code

90211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Actor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: C592252

Amount of Each Receipt this Period

4500.00

B.

Full Name (Last, First, Middle Initial)

Alison Kerber

Mailing Address 6116 Chalet Drive

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 4 / 2 0 0 7

Transaction ID: C597390

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Alison Kerber

Mailing Address 6116 Chalet Drive

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 4 / 2 0 0 7

Transaction ID: C597393

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Alison Kerber

Mailing Address 6116 Chalet Drive

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 7

Transaction ID: C597397

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Alison Kerber

Mailing Address 6116 Chalet Drive

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: C610043

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Alison Kerber

Mailing Address 6116 Chalet Drive

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 7

Transaction ID: C610045

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Alison Kerber

Mailing Address 6116 Chalet Drive

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: C1644976

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Andria McCool

Mailing Address 21 Old Spanish Trail

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Business Consultant/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 8 / 2 0 0 7

Transaction ID: C597395

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Andria McCool

Mailing Address 21 Old Spanish Trail

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Business Consultant/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 0 7

Transaction ID: C597394

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Andria McCool

Mailing Address 21 Old Spanish Trail

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Business Consultant/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 7

Transaction ID: C597398

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Andria McCool

Mailing Address 21 Old Spanish Trail

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Business Consultant/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 7

Transaction ID: C610046

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Andria McCool

Mailing Address 21 Old Spanish Trail

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Business Consultant/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 7

Transaction ID: C610047

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Andria McCool

Mailing Address 21 Old Spanish Trail

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Business Consultant/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	7

Transaction ID: C1644977

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

5100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

West Bend Mutual Ins Co.

Mailing Address 1900 South 18th Ave.

City

West Bend

State

WI

Zip Code

53095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3175.63

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 7

Transaction ID: C1644989

Amount of Each Receipt this Period

57.20

Refund

SUBTOTAL of Receipts This Page (optional)

57.20

TOTAL This Period (last page this line number only)

57.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City

Minneapolis

State

MN

Zip Code

55479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: C1644983

Amount of Each Receipt this Period

33.42

Interest

B.

Full Name (Last, First, Middle Initial)

Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City

Minneapolis

State

MN

Zip Code

55479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: C1644984

Amount of Each Receipt this Period

31.58

Interest

C.

Full Name (Last, First, Middle Initial)

Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City

Minneapolis

State

MN

Zip Code

55479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: C1644985

Amount of Each Receipt this Period

23.78

Interest

SUBTOTAL of Receipts This Page (optional)

88.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 26

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City

Minneapolis

State

MN

Zip Code

55479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.67

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: C1644986

Amount of Each Receipt this Period

17.35

Interest

B.

Full Name (Last, First, Middle Initial)

Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City

Minneapolis

State

MN

Zip Code

55479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.67

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: C1644987

Amount of Each Receipt this Period

7.87

Interest

C.

Full Name (Last, First, Middle Initial)

Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City

Minneapolis

State

MN

Zip Code

55479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.67

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: C1644988

Amount of Each Receipt this Period

7.56

Interest

SUBTOTAL of Receipts This Page (optional)

32.78

TOTAL This Period (last page this line number only)

121.56

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Blue State Digital, LLC	Transaction ID: D100502 Date of Disbursement																				
Mailing Address 1000 Vermont Avenue, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	7		2	0	0	7												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Web Site	<table border="1"> <tr> <td>202.25</td> </tr> </table>	202.25																			
202.25																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table>	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Blue State Digital, LLC	Transaction ID: D100503 Date of Disbursement																				
Mailing Address 1000 Vermont Avenue, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	7												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Web Site	<table border="1"> <tr> <td>202.25</td> </tr> </table>	202.25																			
202.25																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table>	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Blue State Digital, LLC	Transaction ID: D100504 Date of Disbursement																				
Mailing Address 1000 Vermont Avenue, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	0	7												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Web Site	<table border="1"> <tr> <td>202.25</td> </tr> </table>	202.25																			
202.25																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table>	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

606.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Blue State Digital, LLC	Transaction ID: D100505 Date of Disbursement																				
Mailing Address 1000 Vermont Avenue, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	7												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Web Site Candidate Name	<table border="1"> <tr> <td colspan="10">203.00</td> </tr> </table>	203.00																			
203.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Blue State Digital, LLC	Transaction ID: D100506 Date of Disbursement																				
Mailing Address 1000 Vermont Avenue, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	7												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Web Site Candidate Name	<table border="1"> <tr> <td colspan="10">2.25</td> </tr> </table>	2.25																			
2.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Capital Accounting Services	Transaction ID: D100483 Date of Disbursement																				
Mailing Address 4190 Vinewood Lane, Ste. 111-554	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	7												
City Plymouth State MN Zip Code 55442	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting Services Candidate Name	<table border="1"> <tr> <td colspan="10">750.00</td> </tr> </table>	750.00																			
750.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

955.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
Capital Accounting Services

Mailing Address 4190 Vinewood Lane, Ste. 111-554

City Plymouth State MN Zip Code 55442

Purpose of Disbursement
Accounting Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100485

Date of Disbursement

08 / 05 / 2007

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)
Capital Accounting Services

Mailing Address 4190 Vinewood Lane, Ste. 111-554

City Plymouth State MN Zip Code 55442

Purpose of Disbursement
Accounting Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100486

Date of Disbursement

09 / 01 / 2007

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)
Capital Accounting Services

Mailing Address 4190 Vinewood Lane, Ste. 111-554

City Plymouth State MN Zip Code 55442

Purpose of Disbursement
Accounting Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100487

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
Capital Accounting Services

Mailing Address 4190 Vinewood Lane, Ste. 111-554

City Plymouth State MN Zip Code 55442

Purpose of Disbursement
Accounting Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100488

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)
Capital Accounting Services

Mailing Address 4190 Vinewood Lane, Ste. 111-554

City Plymouth State MN Zip Code 55442

Purpose of Disbursement
Accounting Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100489

Date of Disbursement

12 / 01 / 2007

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)
Cybersource

Mailing Address 1295 Charleston Rd.

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100490

Date of Disbursement

08 / 02 / 2007

Amount of Each Disbursement this Period

42.12

SUBTOTAL of Disbursements This Page (optional)

1542.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Cybersource	Transaction ID: D100491 Date of Disbursement																				
Mailing Address 1295 Charleston Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	5		2	0	0	7												
City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Fees Candidate Name	<table border="1"> <tr> <td colspan="10">43.17</td> </tr> </table>	43.17																			
43.17																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Cybersource	Transaction ID: D100492 Date of Disbursement																				
Mailing Address 1295 Charleston Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	2		2	0	0	7												
City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Fees Candidate Name	<table border="1"> <tr> <td colspan="10">41.97</td> </tr> </table>	41.97																			
41.97																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Cybersource	Transaction ID: D100493 Date of Disbursement																				
Mailing Address 1295 Charleston Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	2		2	0	0	7												
City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Fees Candidate Name	<table border="1"> <tr> <td colspan="10">42.72</td> </tr> </table>	42.72																			
42.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

127.86

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City
Mountain View

State
CA

Zip Code
94043

Purpose of Disbursement

Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100494

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

43.65

B.

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City
Mountain View

State
CA

Zip Code
94043

Purpose of Disbursement

Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100495

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

21.42

C.

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City
Mountain View

State
CA

Zip Code
94043

Purpose of Disbursement

Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100484

Date of Disbursement

07 / 03 / 2007

Amount of Each Disbursement this Period

22.97

SUBTOTAL of Disbursements This Page (optional)

88.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
NGP Software

Mailing Address 5505 Connecticut Ave.

City Washington State DC Zip Code 20015

Purpose of Disbursement
Software Support

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100500

Date of Disbursement

08 / 07 / 2007

Amount of Each Disbursement this Period

1200.00

B.

Full Name (Last, First, Middle Initial)
NGP Software

Mailing Address 5505 Connecticut Ave.

City Washington State DC Zip Code 20015

Purpose of Disbursement
Software Support

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100501

Date of Disbursement

11 / 19 / 2007

Amount of Each Disbursement this Period

1200.00

C.

Full Name (Last, First, Middle Initial)
Ryan, Phillips, Ultrecht & MacKinnon

Mailing Address 1133 Connecticut Ave. NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Legal Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100507

Date of Disbursement

08 / 31 / 2007

Amount of Each Disbursement this Period

20.75

SUBTOTAL of Disbursements This Page (optional)

2420.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
Ryan, Phillips, Utrecht & MacKinnon

Mailing Address 1133 Connecticut Ave. NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Legal Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100496

Date of Disbursement

08 / 07 / 2007

Amount of Each Disbursement this Period

135.71

B.

Full Name (Last, First, Middle Initial)
Ryan, Phillips, Utrecht & MacKinnon

Mailing Address 1133 Connecticut Ave. NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Legal Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100497

Date of Disbursement

10 / 03 / 2007

Amount of Each Disbursement this Period

367.27

C.

Full Name (Last, First, Middle Initial)
Savories Catering

Mailing Address 2400 London Road

City Duluth State MN Zip Code 55812

Purpose of Disbursement
Catering - Event

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100511

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

307.87

Not for a fed. candidate

SUBTOTAL of Disbursements This Page (optional)

810.85

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100512 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	7												
<table border="1"> <tr> <td>City Minneapolis</td> <td>State MN</td> <td>Zip Code 55479</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Bank Fees</td> <td rowspan="2">001 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Minneapolis	State MN	Zip Code 55479	Purpose of Disbursement Bank Fees		001 Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>7.23</td> </tr> </table>	7.23											
City Minneapolis	State MN	Zip Code 55479																			
Purpose of Disbursement Bank Fees		001 Category/ Type																			
Candidate Name																					
7.23																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100513 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	7												
<table border="1"> <tr> <td>City Minneapolis</td> <td>State MN</td> <td>Zip Code 55479</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Bank Fees</td> <td rowspan="2">001 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Minneapolis	State MN	Zip Code 55479	Purpose of Disbursement Bank Fees		001 Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00											
City Minneapolis	State MN	Zip Code 55479																			
Purpose of Disbursement Bank Fees		001 Category/ Type																			
Candidate Name																					
20.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100514 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	7												
<table border="1"> <tr> <td>City Minneapolis</td> <td>State MN</td> <td>Zip Code 55479</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Bank Fees</td> <td rowspan="2">001 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Minneapolis	State MN	Zip Code 55479	Purpose of Disbursement Bank Fees		001 Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>4.50</td> </tr> </table>	4.50											
City Minneapolis	State MN	Zip Code 55479																			
Purpose of Disbursement Bank Fees		001 Category/ Type																			
Candidate Name																					
4.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

31.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100515 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0	7
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1	2		0	5		2	0	0	7												
City Minneapolis State MN Zip Code 55479	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fees Candidate Name	<table border="1"> <tr> <td colspan="10">3.28</td> </tr> </table>	3.28																			
3.28																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100516 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	7												
City Minneapolis State MN Zip Code 55479	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fees Candidate Name	<table border="1"> <tr> <td colspan="10">20.00</td> </tr> </table>	20.00																			
20.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100517 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0	7
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City Minneapolis State MN Zip Code 55479	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fees Candidate Name	<table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>	15.00																			
15.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

38.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100518 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	7													
City Minneapolis State MN Zip Code 55479	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fees Candidate Name	<table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>	15.00																			
15.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100519 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	7													
City Minneapolis State MN Zip Code 55479	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fees Candidate Name	<table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>	15.00																			
15.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wells Fargo Bank, N.A.	Transaction ID: D100510 Date of Disbursement																				
Mailing Address P.O. Box B 514	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	7													
City Minneapolis State MN Zip Code 55479	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fees Candidate Name	<table border="1"> <tr> <td colspan="10">34.00</td> </tr> </table>	34.00																			
34.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

64.00

TOTAL This Period (last page this line number only)

8935.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)

Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Ave. NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100499

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 0 6 / 2 0 0 7

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A.

Full Name (Last, First, Middle Initial)
DFL House Caucus

Mailing Address 255 E. Plato Blvd.

City State Zip Code
Saint Paul MN 55107

Purpose of Disbursement
Contribution

Candidate Name

012
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100498

Date of Disbursement

08 / 07 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Federal Election Commission

Mailing Address P.O. Box 979050

City State Zip Code
Saint Louis MO 63197

Purpose of Disbursement
FEC Administrative Payment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D100508

Date of Disbursement

10 / 17 / 2007

Amount of Each Disbursement this Period

7200.00

SUBTOTAL of Disbursements This Page (optional) ►

8200.00

TOTAL This Period (last page this line number only) ►

8200.00